he has left unnoticed those found to be useless. The suggestions show an acquaintance with recent literature, if erythrol tetra-nitrate and eucaine are evidence. Sometimes they seem trivial, as a two-grain quinine pill, thrice daily, for bromidrosis; or are misleading, as "for attacks of dyspnœa and angina, trinitrin should be tried, or nitroglycerin." The author seems to think it his duty to warn the above-mentioned junior as to new remedies; of some he will imagine their origin, as chinosol, valsol—be it ichthyol, menthol, salicylic, chloroform--camphor, iodine, or iodoform, or iron jelloids, while others may not be very familiar, as Fletcher's vibrona, emol-keleet, or jugum penis for enuresis nocturna. One remedy is frequently recommended, and it is to be obtained in Cannon Street, E. C. It is branalcane, and is supposed to benefit bromidrosis, cancrum oris, croup, diphtheria, gangrene of the lung, fissure and pruritus of the anus, stomatitis, both plain and aphthous, hay-asthma, leucorrhœa, and sore-throat. We wish that we could indorse the author's commendation, but we cannot, for the text-books and even the advertising pages of the journals are silent as to its composition. In the mean time it seems that it might be useful to the orificial surgeons, and their attention is respectfully directed to it. The remainder of the book is devoted to health-resorts, poisons and their antidotes, metrical measures, the urine, sputum, method of staining tubercle bacilli, vomit, feces, and therapeutic serums.

Books of this order should have a very limited use; we fear that they are incentives to indolence. We regret that the author has written this; he is worthy of far better things. R. W. W.

RETINOSCOPY (OR SHADOW TEST) IN THE DETERMINATION OF REFRACTION AT ONE METRE DISTANCE WITH THE PLANE MIRROR. By JAMES THORINGTON, M.D., Adjunct Professor of Diseases of the Eye in the Philadelphia Polyclinic and College for Graduates in Medicine, etc. Second edition, revised and enlarged. Thirty-eight illustrations, twelve of which are colored. Philadelphia: P. Blakiston, Son & Co., 1898.

THE study of retinoscopy by the plane mirror by students interested in acquiring proficiency in this essential objective method of estimating refraction errors received a decided impetus from the publication of the first edition of Thorington's work, and we do not hesitate to say that the beginner in ophthalmology has found great aid and benefit from its perusal. It presents the subject plainly, clearly, accurately, tersely; and careful reading, together with the application of its principles to clinical cases, will do much to familiarize the student with the essentials. In no other book are the principles of retinoscopy so well taught, and with such practical bearing, as in this work of Thorington, and it is with the greatest pleasure that we heartily recommend the second edition to every refractionist. The book is well bound, well printed on good, thick paper, and thoroughly well illustrated.

H. F. H.

PROGRESS

OF

MEDICAL SCIENCE.

MEDICINE.

UNDER THE CHARGE OF

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Concerning the Coagulation Action of Gelatin on the Blood.—L. CAMAS and E. GLEY (*Société de Biologie*, November 18, 1898) state that Dastre and Floresco showed that the coagulation of dogs' and rabbits' blood is considerably increased by the injection of a 5 per cent. solution of gelatin into their veins. They then ask the question: Is the same result to be expected to follow subcutaneous or intraperitoneal injections? *A priori*, they hold that there is every reason to doubt that it does.

Lancereaux and Paulesco conducted a series of experiments on rabbits in connection with the former's method of treating aneurisms by gelatin injections. They found that the rapidity of coagulation of the blood was increased by 100 c.c. of a 2 per cent. gelatin solution into the animal's peritoneal cavity.

Camus and Gley made intraperitoneal injections of gelatin in rabbits in three cases, and in every instance the coagulation time of the blood was delayed. They believe that the absence of an increased rapidity of coagulation is due to the gelatin being non-dializable. They believe that when gelatin, injected subcutaneously, disappears after several hours it does not enter the vessels as such, but first undergoes a modification of the nature of a digestive process.

The Effect of the Injection of Salt-Solution and Gelatin.—At the session of the Paris Academy of Medicine held November 29, 1898, the subject of the capability of the organism to absorb gelatin and its effect on the coagulability of the blood was again under discussion.

Lancereaux, contrary to the opinion of M. Laborde, held that gelatin is soluble in artificial serum and is not precipitated at the temperature of the body. Moreover, many non-dializable substances, such as sero-fibrinous